SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER
(check only one)

FOR L	PAGE	- 4	14 OF	111			
(check	only or	ne)					
X 11	а	11b		11c		12	
13	3	14		15		16	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.								
	NAME OF COMMITTEE (In Full) TAKE BACK THE SENATE							
Α.	Full Name of Individual (Last, First, Middle Init HERBERT, CECILIA, , ,	Date of Receipt						
	Mailing Address 4750 CORTLAND DRIVE	08						
	City	State	Zip Code	Transaction ID : SA11A.53148				
	JACKSON	WY	83001-	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		2500.00				
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item				
	BLACKROCK ISHARES	ВОА	RD MEMBER	CONTRIBUTION				
	Receipt For: Primary General		Year-to-Date ▼ 2500.00	EARMARKED FROM WINRED				
	Other (specify)		2500.00					
В.	Full Name of Individual (Last, First, Middle Init HERBERT, JAMES, , ,	Date of Receipt						
	Mailing Address 4750 CORTLAND DRIVE		08 02 2022					
	City	State	Zip Code	Transaction ID : SA11A.53147				
	JACKSON	WY	83001-	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		2500.00				
	Name of Employer (for Individual) FIRST REPUBLIC BANK		pation (for Individual) INDER EXECUTIVE CHAIRMAN	Memo Item CONTRIBUTION				
	Receipt For:	Aggregate `	Year-to-Date ▼					
	Primary General Other (specify) ▼		, 2500.00	EARMARKED FROM WINRED				
	Full Name of Individual (Last, First, Middle Init HOWE, DEBBIE, , ,	Date of Receipt						
•	Mailing Address 12173 PLANTATION WAY	08 31 2022						
	City	State Zip Code		Transaction ID : SA11A.53149				
	PALM BEACH GARDENS	FL 33418-		Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	C		25000.00				
	Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item				
	ADVANCED HEALTH CARE	PRESIDENT		CONTRIBUTION				
	Receipt For:	Aggregate Year-to-Date ▼						
	Primary General Other (specify)		25000.00	EARMARKED FROM WINRED				
s	SUBTOTAL of Receipts This Page (optional)			30000.00				
Т	OTAL This Period (last page this line number of	only)						